

***KENOSHA HISTORIC PRESERVATION COMMISSION
APPLICATION FORM***

NAME OF PROPERTY	
LOCATION OF PROPERTY - STREET ADDRESS (PLEASE INCLUDE A MAP WITH THE PROPERTY INDICATED)	
CITY	COUNTY

PRESENT OWNER (IF OTHER THAN PERSON COMPLETING APPLICATION)
ADDRESS
CITY, STATE, ZIP
DAYTIME PHONE NUMBER

NAME OF PERSON COMPLETING APPLICATION
ADDRESS
CITY, STATE, ZIP
DAYTIME PHONE NUMBER

DESCRIPTION OF PROPERTY

- A) PLEASE SUBMIT RECENT COLOR PHOTOGRAPHS THAT SHOW ALL SIDES OF THE EXTERIOR OF THE STRUCTURE, VIEWS OF THE INTERIOR OF THE STRUCTURE, AND ANY ASSOCIATED OUTBUILDINGS. THE PHOTOGRAPHS CANNOT BE RETURNED, BUT WILL BECOME A PERMANENT PART OF OUR SITE RECORDS. DIGITAL IMAGES ARE PREFERRED.
- B) PLEASE DRAW A SIMPLE SKETCH MAP OF THE LOT ON WHICH THE STRUCTURE IS LOCATED OR PROVIDE A RECENT PROPERTY SURVEY SHOWING ALL IMPROVEMENTS. INCLUDE ALL STRUCTURES, STREETS, AND OTHER MAJOR FEATURES. PHOTOGRAPHS OF THE BUILDINGS SHOULD BE KEYED TO THIS SKETCH.
- C) HAS THE PROPERTY BEEN MOVED FROM ITS ORIGINAL SITE? IF SO, WHY, FROM WHERE, AND WHEN?
- D) EXPLAIN ANY WAY IN WHICH THE PROPERTY IS PRESENTLY THREATENED.

HISTORY AND SIGNIFICANCE OF THE PROPERTY

WHY DO YOU THINK THAT THIS PROPERTY SHOULD BE LISTED AS A KENOSHA HISTORIC SITE? PLEASE CHECK ONE OR MORE OF THE FOLLOWING CRITERIA THEN BRIEFLY, IN THE SPACE PROVIDED BELOW, EXPLAIN HOW THE PROPERTY MEETS THE CRITERIA FOR STATEMENTS OF HISTORICAL FACT. PLEASE INDICATE YOUR SOURCE(S) OF INFORMATION. (KEEP IN MIND THAT OUR EVALUATION MAY DEPEND SOLELY ON THE INFORMATION THAT YOU SUBMIT; THEREFORE, YOUR SOURCES SHOULD BE RELIABLE.) YOU MAY ATTACH ADDITIONAL PAGES, IF NECESSARY.

- 1) REPRESENTS THE WORK OF A MASTER
- 2) POSSESSES HIGH ARTISTIC VALUES

- 3) REPRESENTS A TYPE, PERIOD, OR METHOD OF CONSTRUCTION
- 4) IS ASSOCIATED WITH THE LIVES OF SIGNIFICANT PERSONS
- 5) IS ASSOCIATED WITH SIGNIFICANT HISTORICAL EVENTS
- 6) REFLECTS THE HISTORY OR DEVELOPMENT OF A LOCALITY (ASSOCIATED WITH ETHNIC GROUPS, INDUSTRIAL DEVELOPMENT, COMMERCIAL DEVELOPMENT, ETC)

<i>Source(s) of Information:</i>	
<i>Page(s)</i>	

IF YOU KNOW THE NAME OF THE ARCHITECT, PLEASE SPECIFY:	
<i>Source(s) of Information:</i>	
<i>Page(s)</i>	

WHEN WAS THE PROPERTY BUILT?	
<i>Source(s) of Information:</i>	
<i>Page(s)</i>	

RETURN FORM TO

DEPARTMENT OF CITY DEVELOPMENT
 625 52ND STREET, ROOM 308
 KENOSHA, WI 53140

IF YOU HAVE ANY QUESTIONS, PLEASE CALL 262.653.4030.